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The role of perceived social support in crime victimization

Marie B.H. Yap^a, Grant J. Devilly^{b,*}

^aDepartment of Psychology, University of Melbourne, Hawthorn, Victoria 3122, Australia ^bCentre for Neuropsychology, Swinburne University, P.O. Box 218, Hawthorn, Victoria 3122, Australia

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Abstract

There has been extensive research into social support (SS) and trauma, but there remains a paucity 8 of knowledge concerning the dynamics of these factors with respect to victims of crime. This review 9 considers the temporal dimension of SS or perceived social support (PSS) in particular, 10 conceptualizing it as an endogenous, dynamic resource [J. Pers. Soc. Psychol. 61 (1991) 899] that 11 can be depleted by chronic stressors. Based on a discussion of existing research, an explanation is 12proposed for the inconsistent findings of PSS as a moderator to distress in some cases and a mediator 13in others. In particular, some researchers have posited that since PSS can deteriorate, it can lose its 14buffering capacity and thus qualitatively change in its role from a stress moderator to a mediator in the 15stress-distress relationship. From a review of the literature, it would seem that PSS can act as a 16moderator of distress in the early stages, but that as the stressors become numerous or chronic PSS 17turns into a mediator between the stressor and psychological distress. This article applies such a 18dynamic perspective of PSS to victims of crime and argues that one's perspective of victim status may 19be well served by taking into account the history of victimization and trauma that these individuals 20have experienced. It is proposed that a history of chronic exposure to victimization or trauma erodes 21victims' perceptions of the SS available to them. In turn, these low levels of PSS result in higher levels 22of distress experienced in the face of subsequent victimization or trauma. The implications of a 23dynamic perspective of SS and victimization for research and practical interventions for victims of 24crime are discussed. 2526

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^{*} Corresponding author.

E-mail address: gdevilly@swin.edu.au (G.J. Devilly).

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1. Introduction

It has been established across a variety of studies that social support (SS) plays an 30important role as a psychosocial resource in protecting physical and psychological health 31(e.g., Bradley & Cartwright, 2002; Mazie, 1985; Quittner, Glueckauf, & Jackson, 1990; 32Sander, High, Hannay, & Sherer, 1999). Generally, SS can be defined as "those social 33 interactions or relationships that provide actual assistance or a feeling of attachment to a 34 person or group that is perceived as caring or loving" (Hobfoll & Stephens, 1990, p. 455, 35emphasis added). Implicit in this definition is the idea that SS is a multifaceted phenomenon, 36 whereby different aspects of SS [e.g., received SS, perceived social support (PSS)] can have 37 differential roles in well-being. Indeed, the heterogeneity of this catchall concept has been 38 identified as one source of inconsistent findings in SS research (see reviews by Heller & 39 Swindle, 1983; Sarason, Sarason, & Pierce, 1990, for discussions of how SS research has 40 evolved over the years and the many SS measures that have been developed and used). Given 41 that PSS has been found most consistently to have a positive impact on well-being (Dolbier & 42Steinhardt, 2000), the focus of this article's review of SS will be limited to primarily PSS. 43

The benefits of SS to crime victims has been convincingly documented, particularly for 44 female and child victims of sexual and physical abuse (e.g., Mitchell & Hodson, 1986; Ruch 45& Leon, 1986; Thompson, Kaslow, Kingree, Rashid, Puett, Jacobs, & Matthews, 2000). 46 Nevertheless, there remains a dearth of knowledge as to the process by which SS is actually 47related to psychological functioning in victims of crime. This precludes definite conclusions 48 regarding how SS is instrumental in the protection of victims from the consequences of the 49traumatic experience. Yet, in light of victim services' evolving and maturing research base 50and attendant practice, it is crucial that service providers gain a better understanding of SS 51and its role in the recovery process. Therefore, there is a pertinent need to clarify the 52relationship between SS variables and well-being in this population. 53

The main objective of this article is to explore the role that SS (PSS, in particular) plays in 54victims of crime. Notably, various studies have shown that one of the strongest predictors of 55victimization is past victimization (e.g., Acierno, Kilpatrick, & Resnick, 1999), and that 56victims of chronic or multiple crimes present with higher and more enduring symptomatol-57ogy, including depression, anxiety, somatization, and posttraumatic stress disorder (PTSD) 58(e.g., Nishith, Mechanic, & Resick, 2000; Norris & Kaniasty, 1994; Wise, Zierler, Krieger, & 59Harlow, 2001). Since SS influences people's adaptation to traumatic events, and if their 60 perceptions of SS and/or ability to effectively utilize SS are influenced by previous traumatic 61 experiences (which is a thesis of this article), it is then vital to take crime victims' histories 62into account when considering the importance of SS for them. It is hypothesized that this 63 would help to reveal any cumulative effects that a history of trauma may have had on their SS 64 system, as well as on their current psychological adaptation. Hence, this review aims to 65delineate the process (mediator or moderator) by which PSS benefits victims of crime under 66 various types of circumstances (e.g., chronic or acute stressor). 67

To achieve such an aim, this paper comprises two parts. The first part reviews general SS 68 literature to establish the current status of understanding regarding SS. This review takes as its 69 starting point the appeal made by recent SS researchers (Holahan, Moos, Holahan, & 70

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Cronkite, 1999; Lepore, Evans, & Schneider, 1991; Quittner et al., 1990) for a careful consideration of the temporal and contextual factors of SS to enable a better understanding of SS processes. A brief review of exemplary research on SS will then be made, along with a discussion of the relevance of the conservation of resources (COR) and support deterioration deterrence (SDD) models, to depict a more dynamic perspective of SS. Cronkite, 1999; Lepore, Evans, & Schneider, 1991; Quittner et al., 1990) for a careful 72 73 74 75

The second part of this paper will highlight the implications of applying the current status of understanding of SS to victims of crime. In particular, the temporal dimension of PSS, victim status (taking into account one's history of victimization), and the PSS–victimization relationship will be the focus of this discussion. Finally, future directions for research and recommendations for interventions for victims of crime will be proposed. 76 77 78 78 79 80

2. The temporal dimension of SS

2.1. Conceptual inconsistencies and limitations

While some researchers have conceptualized SS as having a strong personality compo-84 nent,¹ such that it is expected to be relatively stable over time, others have viewed SS as a 85 perception that is based on experience and is therefore vulnerable to fluctuations over time 86 and subject to recent experience (e.g., Asendorf & Wilpers, 2000; see discussion by Sarason 87 et al., 1990). One problem with prior studies is that researchers sometimes fail to distinguish 88 between these two views in their operational definition and measurement of SS. Although 89 empirical support has been reported for both views, such research has given rise to equivocal 90 findings that are difficult to interpret. This review focuses on the view of SS as a perception 91based on recent experience and will examine only the studies that have a congruent view. 92

The lack of a temporal dimension in SS research is closely tied to a preoccupation with the 93 classic main or buffering-effect models. The buffering hypothesis posits that support 94"buffers" or protects individuals from the potentially adverse consequences of stressful 95 experiences and is primarily beneficial for people under stress. The alternative, main-effect 96 model, purports that SS has a general beneficial effect irrespective of whether people are 97 under stress, through the provision of regular positive experiences and a sense of self-worth 98 and stability in one's social life (Cohen & Wills, 1985). The main weakness of these models 99is that they depict SS as a static, exogenous variable that is independent of the individual's 100circumstances (Lepore et al., 1991). 101

¹ Sarason et al. (1990) proposed an interactional model of support that centers around a personality variable termed "sense of acceptance," whereby PSS is a function of one's sense of acceptance, the type of stressful situation, and the quality of the current primary relationships. They borrow from traditional attachment theory, which purports that children acquire a general schema for social relationships through their early experience with their primary caregivers (usually parents), and this schema then guides their expectations and perceptions of all close relationships later on in life (including peer and love partner relationships). Sarason et al. adopt this perspective in assuming that the sense of acceptance in adulthood is also deeply rooted in experiences with one's parents in early childhood, thus making PSS a stable personality trait.

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In more recent years, the search for specific causal links in the stress process has led some 102researchers to challenge the widely accepted view of SS as a "buffer." These researchers 103contend that such an unquestioning acceptance of this view obscures other possible effects that 104 SS might have on well-being (Lepore et al., 1991; Ouittner et al., 1990). Specifically, Lepore et 105al. (1991) asserted that the effects of stressors on support processes have not been sufficiently 106 investigated. One proposed reason lies in an implicit assumption of this buffering hypothesis 107 of SS as a stable resource that is independent of stress. Consequently, the stressor-support 108 relationship is often not empirically tested. In fact, such an association might be considered 109undesirable or be suspected of indicating a confounded relationship between the stressor and 110SS (Cohen & Wills, 1985). Furthermore, although Cohen and Wills (1985) specifically 111 recommended that the independence of the stressor and support measures be empirically 112established, existing research continues to be plagued by the lack of such confirmatory tests 113(e.g., Murphy, 1987) or equivocal reports of "buffering effects" when a relationship between 114 stress and support was found (e.g., Comijs, Penninx, Knipscheer, & Tilburg, 1999). 115

In fact, the dynamics of the stressor–support relationship over time (as the levels of stress 116 and/or SS change) is an area of research worthy of further investigation. Since the assumption 117 of a dynamic relationship while researching this area is inherently incompatible with the basic 118 assumption of a buffering model, an alternative framework is required to provide a possible 119 theoretical account of this stressor–support relationship. 120

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2.2. Alternative perspective

There has been an emerging alternative perspective on the role of SS in the relationship 123 between stress and psychological distress, which conceptualizes SS as a "dynamic, endogenous 124 variable that can be affected by certain stressors" (Lepore et al., 1991, p. 899). This makes way 125 for a third, indirect effect or mediator model in the explanation of SS processes. The mediator 126 model posits that SS functions as an intervening variable between stressor and outcome, such 127 that changes in support are a result of the stressor and serve as an underlying process that 128 explains changes in psychological distress (Lepore et al., 1991; Quittner et al., 1990). 129

A growing body of research (e.g., Lepore et al., 1991; Norris & Kaniasty, 1996; Holahan et 130al., 1999; Quittner et al., 1990; Thompson et al., 2000) has reported that SS (namely 131perceptions of available support, PSS) is a potent mediator of the stress-distress relation. 132These studies found that PSS was eroded by pervasive, chronic stressors, and individuals with 133lower PSS have presented with higher distress levels. Furthermore, this finding was 134consistent across a variety of samples, ranging from community-resident adults (Holahan 135et al., 1999) and college students in crowded living conditions (Lepore et al., 1991), to 136mothers of handicapped children (Quittner et al., 1990), natural disaster victims (Kaniasty & 137Norris, 1996), and victims of partner violence (Thompson et al., 2000). 138

2.3. Mediators versus moderators

Although some researchers tend to use the terms "moderator" and "mediator" interchangeably, Baron and Kenny (1986) emphasized the necessity of this differentiation to 142

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enable a better understanding of the relationships amongst factors due to the important conceptual and strategic implications in research. As explained by Baron and Kenny, "moderators" affect the strength or direction of effects or relationships (i.e., they specify the conditions under which the variable exerts its effects). "Mediators," on the other hand, reveal how these effects come about without telling their strength or direction (i.e., they account for the link between the predictor and outcome variables).

Baron and Kenny (1986) have proposed a specific compendium of analytic procedures to 149facilitate the most effective use of the moderator-mediator distinction. Briefly, a moderator 150effect is evidenced by a Significant Moderator (e.g., PSS) × Predictor (e.g., level of violence) 151interaction effect on the outcome (e.g., distress) over and above any independent main effects 152of the moderator and predictor variables (see Fig. 1). In contrast, a mediator effect is tested by 153a path-analytic model, whereby a significant reduction in the direct predictor-outcome path 154demonstrates that the given mediator is indeed potent, though neither necessary nor sufficient 155for an effect to occur (see Fig. 2). Nonetheless, this model also requires that variations in the 156predictor (e.g., victimization) account for variations in the mediator (e.g., PSS), and that 157variations in the mediator account for variations in the outcome (e.g., distress). 158

Although Baron and Kenny's (1986) recommended statistical techniques have become 159increasingly applied to psychological research, the prevalence of multidisciplinary research 160on SS has resulted in the dissemination of research with inadequate statistical analyses. The 161analytic techniques used to test for moderator effects in earlier studies have failed to follow 162Baron and Kenny's recommendations (see discussion by Cleary & Kessler, 1982). Instead, 163the less preferred or accepted method, analysis of variance (ANOVA), is often used. Whereas 164the requirement for testing a moderator effect using ANOVA is merely a Stress \times Support 165interaction, the regression analysis controls for any main effect of stress and of SS (which are 166treated as continuous variables). This method is preferred because the effect of the reported 167interaction is then over and above the potentially confounding main effect (Cohen & Wills, 1681985). 169

Indeed, when following Baron and Kenny's (1986) recommendations, Quittner et al. (1990) found that in the face of chronic parenting stress, PSS played a mediator role. It is noteworthy that the parental stress experienced by the mothers was conceptualized as chronic because they were interviewed at least 1 year after discovering the handicap of their children. Quittner et al. found that the PSS of mothers with handicapped children was eroded by the chronic strain of their circumstances, and lower PSS was associated with higher distress.

Notably, Quittner et al. (1990) also tested for the buffering effects of PSS, but none was found. In explaining this finding, Quittner et al. proposed that SS functions differently between chronic and acute situations; rather than mitigating the impact of stress, PSS is itself

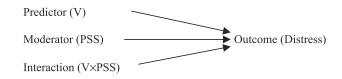


Fig. 1. Diagram depicting a moderator/buffering effect. V=Violence; PSS=perceived social support.

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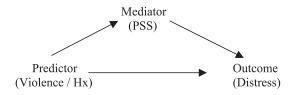


Fig. 2. Diagram depicting a mediator effect of PSS in the relationship between violence or history of victimization and outcome. PSS=Perceived social support; Hx=history of victimization/trauma.

negatively influenced (deteriorated) by ongoing strain. Furthermore, they contended that 179 previous studies had relied heavily on ad hoc scales or measures with questionable 180 psychometric properties, resulting in reports of significant interactions as evidence of 181 buffering effects with a resultant elevation of type I errors. 182

Likewise, in the 10-year longitudinal study of a community sample by Holahan et al. 183 (1999) (N=326), people who had experienced more negative than positive events in the 10-184year period reported a decline in quality of family relationships and increased depressive 185symptomatology at follow-up. Using an integrative structural equation model (Baron & 186Kenny's, 1986, preferred technique), Holahan et al. found the association between change in 187 life events and depressive symptomatology at follow-up to be completely mediated by change 188in personal and social (i.e., family support) resources during the 10-year interval. Thus, in the 189face of the protracted (i.e., chronic) strain of negative events, PSS (measured as "family 190support" here) was better accounted for as a mediator in the stressor-symptomatology 191 association. 192

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2.4. A conceptual milestone

Of interest, Lepore et al. (1991) demonstrated the dynamic nature of SS and the 195stressor-support relationship with findings from their longitudinal study, which examined 196the effects of chronic household crowding on psychological distress. Moderator effects of 197 PSS were found at the 2-month follow-up, but not at the 8-month follow-up—the 198Stress \times Support interaction effect on distress had disappeared after 8 months (i.e., the 199buffering effect had diminished). Instead, PSS functioned as a mediator: Crowding was 200associated with decreases in PSS from 2 to 8 months after occupancy and decreases in 201 PSS were in turn associated with increases in levels of psychological distress during that 202period. 203

Thus, the findings of Lepore et al. (1991) suggest that the role of PSS in the stress 204 process can change qualitatively. In agreement with Quittner et al. (1990), and later 205Holahan et al. (1999), Lepore et al. posited that perceptions of available support may 206initially function as a buffer at the onset or occurrence of a chronic stressor or under acute 207 stressful conditions. However, the protracted nature of chronic stressors may have insidious 208effects on one's perceived support (e.g., provider burnout-actual or perceived or 209recipient's perceptions of obligation or guilt for being a burden), such that it loses its 210buffering capacity. This deterioration of SS could, in turn, increase psychological distress 211(i.e., mediator role). 212

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3. SS models

In order to better contextualize one's perception of SS and victimization history, a short 214synopsis of the most notable models is provided below. The models were selected due to their 215representativeness of different aspects of SS, and more specifically their direct relevance to 216the thesis of this article, which is a consideration of the dynamic nature of PSS in victims of 217crime. These models have been tested by relevant research and propose cogent explanations 218of the process by which PSS is related to the psychological functioning of victims of crime. In 219all, while there are other theories of SS, the below are broadly, yet selectively, representative 220of our current paradigm. 221

3.1. The SDD model (Norris & Kaniasty, 1996)

Extending the conceptualization of SS by Lepore et al. (1991), the SDD model stipulates 224that "postdisaster mobilization of received support [RSS] counteracts the deterioration in 225expectations of support [PSS] often experienced by victims of major stressors" (Norris & 226Kaniasty, 1996, p. 498, emphasis added). In the long run, this preservation of PSS is believed 227to benefit victims' psychological health. Of relevance, this model presupposes two key 228 points. Firstly, extreme stressors such as disaster or victimization have the potential to disturb 229victims' ongoing perceptions of available support (support deterioration hypothesis). Sec-230ondly, PSS is hypothesized to serve a protective role (protective appraisal hypothesis): The 231higher the PSS, the lower the distress would be. 232

3.2. The COR theory

Correspondingly, the COR theory of Hobfoll et al. (Hobfoll, Dunahoo, & Monnier, 1995; 235Hobfoll & Stephens, 1990) is a significant exception to SS researchers' tendency to overlook 236the "nature, consequences and determinants of resource change" (Holahan et al., 1999, p. 237620, emphasis added). According to this theory, the COR (e.g., SS) is central to the stress 238process, such that loss is the main driving mechanism underlying stress reactions. This theory 239is based on the premise that individuals are innately motivated to obtain, retain, and protect 240their personal and social resources, and that they experience stress when circumstances 241threaten or diminish these resources. Moreover, just as resources tend to beget resources, 242resource loss tends to result in further loss, potentially resulting in a resource loss cycle. This 243can begin immediately and/or have a long-term effect on individuals. Thus, COR theory 244posits that individuals have a resource threshold that, when substantially overburdened (e.g., 245by multiple traumas), accelerates the loss cycle. The consequence being a great increase in 246impact and momentum of psychological effects on the individual. 247

3.3. The posttraumatic resource ecology (PRE) model

In addition, Hobfoll et al. (1995) proposed a PRE model to address the critical 250function of resource loss in traumatic stress. This model encompasses various socio-251

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ecological levels from which people can draw resources, ranging from internal (individ-252ual) to increasingly external (family, organization, and community) levels. They hypothe-253size that when people are dislocated from their social system (e.g., perceive low SS), 254they are isolated from the available resources from these ecological levels. Thus, they are 255more vulnerable to ongoing levels of loss and associated psychological distress. Indeed, 256the findings of Holahan et al. (1999) provide a cogent application of this model. People 257who experienced an increase in the preponderance of negative over positive events 258experienced ongoing loss of personal and social resources across 10 years, resulting in 259heightened symptomatology. 260

4. SS in victims of crime

At present, research on various kinds of stress suggests that PSS can indeed shift 262qualitatively between a moderator of stress and a mediator in the stress-distress 263relationship. One factor that is proposed to influence whether SS acts as a moderator 264or mediator is the chronicity of the stressor. Nonetheless, other potential factors remain to 265be investigated by further research. Notwithstanding, the above review has important 266implications for understanding the SS of victims of crime. For the purpose of discussion, 267 the question of whether PSS is a moderator (buffer) or a mediator in victims of crime 268will first be considered. Thereafter, the dynamics of SS for this specific demographic will 269be discussed. 270

4.1. PSS of victims of crime: mediator or moderator?

As far as victims of crime are concerned, the process by which SS operates to protect them 273from adverse psychological consequences remains unclear. Although much research has been 274done on SS, few studies have looked specifically at a victim sample. Those researchers who 275have considered SS in victims of crime have mostly taken the traditional view of SS as a 276buffer (e.g., Comijs et al., 1999). However, buffer effects were mostly observed in between-277group studies that compared victims with nonvictims (who would presumably report 278relatively low stress levels) or in studies that found a direct protective effect of PSS and 279reported it as a "buffering effect," although no interaction effect was tested for. Therefore, the 280question remains as to how PSS actually operates, especially when considering within-group 281effects, across victims who have different histories. 282

It is contended that matched case-control sample testing (between-group) may find 283 buffering effects because the selection of a control sample usually entails that it is not facing 284the stressor of interest (i.e., victimization) and is thus essentially less distressed. For this 285group, SS may be less consequential or relevant and/or tends to be relatively unscathed by the 286stressors of general life. As such, the protective effect of SS, even if present, will not be 287detected when compared to the victim group, which tends to be relatively more distressed. 288 Furthermore, since the buffering model implicitly assumes that stressors and SS are 289independent factors, the stressor-moderator relationship is often not empirically tested, thus 290

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remaining unfalsified. In effect, the Stressor × Support interaction found in such studies supporting the buffering model may be an artifact of preselected differences in the samples compared. The victim group is more distressed; thus, the protective mechanism of SS will be more significant for these individuals than it would be for those in the comparison group who are not being/have not been victimized.

For example, Kaniasty and Norris (1992) reported that PSS consistently protected both 296violent and property crime victims against symptoms of depression, anxiety, hostility, and 297fear. They found a group by PSS interaction (a buffering effect) when they compared the 298effects of PSS on these victims versus nonvictims. Likewise, Ruch and Leon (1986) reported 299that for rape survivors (as compared to nonvictims), PSS was a buffer of stress. Although 300 meaningful for the purpose of their studies, these findings regarding the buffering role of PSS 301 remain equivocal because of the sampling problem raised above. In contrast, a more valid test 302 of buffering effects would be to assess within groups differences (i.e., victims only) or only 303 across time (i.e., prospective study with victims), such that distress levels are not preselected 304 into comparison groups. The independence of the stressor and SS should also be verified 305 statistically (Cohen & Wills, 1985). Any protective effects of SS derived can then be more 306 accurately attributed to the protective mechanism of SS in individuals under higher stress 307 (where the stressor is a continuous factor rather than dichotomized, i.e., victim group vs. 308 nonvictim group). 309

Indeed, researchers have found a direct association between SS and psychological 310 functioning in combat veterans (O'Brien, 1998) and cancer patients (Holland et al., 311 1999) amongst many other nonvictim populations, such as caregivers for head injured 312patients (Sander et al., 1999), nurses (Bradley & Cartwright, 2002), and medical 313 practitioners (Mazie, 1985) to name but a few. O'Brien (1998) noted that some Israeli 314studies of combat stress reaction cases from the Lebanon War showed that PSS had a 315predictive relationship with PTSD. Benight, Swift, Sanger, Smith, and Zeppelin (1999) 316 also found PSS to be a predictor of distress in disaster survivors, and Holland et al. 317 (1999) found psychological distress to be negatively correlated with PSS in melanoma 318 sufferers. 319

Cheever and Hardin (1999) found that PSS served a direct protective function in the relationship between adolescents' exposure to traumatic events and their self-assessment of health. Although they did not test the actual function of this third variable (mediator or moderator), they reported a significant regression coefficient demonstrating the direct impact of PSS on adolescents' health.

• As discussed earlier, various studies have recognized that perceptions of SS are not always 325 independent of stress but are particularly vulnerable to postevent deterioration (Kaniasty & 326 Norris, 1993; Norris & Kaniasty, 1996). As such, comparing the PSS of nonvictims and 327 victims would arguably be different from comparing PSS across victims, by virtue of their 328experiences, and especially when their histories of victimization or trauma (Hx) are taken into 329consideration. Indeed, it is possible that PSS serves as a mediator between the Hx of crime 330 victims and their subsequent functioning, although this postulation remains untested. 331However, it is necessary to first review the literature on the long-term effects of victimization 332 and other traumas on PSS. 333

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4.2. Long-term effects on PSS: crime victimization

A few studies have looked at the long-term effects of trauma on PSS and its relationship 336 with psychological functioning over time and through multiple traumatic experiences. 337

In an early cross-sectional study of rape victims, Frank, Turner, and Stewart (1980) 338 reported that while prior sexual victimization did not affect measures of depression, anxiety, 339 or fear, such a history was associated with significant disruption in social functioning in the 340 victim's immediate household within a month of the rape. Although Frank et al. did not test 341 for mediator effects, their findings suggest that a history of past sexual victimization might 342 have an indirect effect on the long-term consequences of trauma by affecting the personal 343 support system of the victim. 344

Similarly, Mitchell and Hodson's (1983) study of 60 women who sought shelter 345following domestic abuse found that women who experienced partner violence were at 346 higher risk of experiencing low levels of SS resources (as a direct effect of partner 347 violence). Moreover, they tested for but failed to find any moderator effects of SS on 348 psychological outcomes (in this case operationalized through depression). Mitchell and 349 Hodson (1986) also reported that battered women with high levels of childhood exposure 350to violence (chronic Hx) reported lower PSS compared to those with less exposure to 351childhood violence. 352

In fact, a more recent cross-sectional study of women who were victims of partner 353 violence revealed that victims' PSS operated as a potent mediator of the violence– 354 distress association (Thompson et al., 2000). Findings based on path analysis indicated 355 that low levels of PSS accounted for a substantial amount of the victims' increased 356 distress, such that a large proportion of the effect of abuse on distress was indirectly 357 mediated by PSS. 358

4.3. Long-term effects on PSS: other stressors

As mentioned above, studies on the effects of criminal victimization and PSS on 361 psychological functioning usually compare between victims and nonvictims (e.g., Ruch & 362 Leon, 1986), even in longitudinal studies (e.g., Norris & Kaniasty, 1994). In contrast, 363 research into the long-term effects of other stressors (e.g., natural disaster) tend to have a 364 design that is more akin to the focus of this review, i.e., within-group (e.g., Norris & Kaniasty, 3651996) or across-group design (e.g., Holahan et al., 1999). Notably, to the authors' knowledge, 366 no study has yet studied the effects of victimization on the PSS of victims nor taken a 367 dynamic perspective of victim status (i.e., Hx) and the PSS of crime victims. The studies 368 discussed above and hereafter are among the rare few that have considered the temporal 369 dimension of SS and of the stressors of interest. Therefore, such studies are also instructive 370 for understanding the role of PSS in victims of crime. 371

Kaniasty and Norris (1993) found that flood victims experienced the impact of the 372 disaster both directly, through the trauma and associated losses, and indirectly, through 373 deterioration of perceived support. As PSS declined, psychological distress increased. This 374 suggests that over time, the erosion of PSS can be one path through which major life 375

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stresses additively exert their adverse effects on subsequent psychological functioning, i.e., 376 a mediator role (see Fig. 2 above).

In fact, Norris and Kaniasty (1996) reported that PSS was an important mediator between scope of exposure and psychological distress in natural disaster survivors. In accordance with their SDD model, they also found that over time (up to 28 months), the scope of exposure to the disaster exerted a lingering adverse effect on psychological distress indirectly through its erosion of PSS. These researchers asserted that such effects also apply to other traumatic events, including multiple crime victimizations, but this possibility remains to be tested (Norris, Byrne, Diaz, & Kaniasty, 2001).

In summary, findings from studies of disasters and chronic life stressors have strongly 392documented the potential eroding impact of stress on PSS (Kaniasty & Norris, 1993; Norris & 393 Kaniasty, 1996). Hence, we would hypothesize that a history of multiple chronic victim-394izations/traumatic experiences (Hx) will have a greater impact on one's PSS as well. 395 Specifically, when victims' histories (i.e., a dynamic view of victim status) are taken into 396 consideration, the direct protective mechanism of PSS will be affected. Hx will in turn have 397 an indirect effect on psychological functioning through its enduring deleterious impact on 398PSS. Therefore, we would expect PSS to be a mediator (rather than a moderator) in the Hx-399 distress relationship for victims of crime as demonstrated in Fig. 2. 400

4.4. The dynamics of PSS in victims of crime

The dynamic nature of SS as observed in prior research suggests that SS can function as a 403buffer or a mediator, depending on the temporal and contextual characteristics of the 404victimization experience. Indeed, the role of SS in the stress process can shift qualitatively. 405 This can be due to characteristics of the crime itself (e.g., personal and sexual crimes such as 406 child sexual abuse) or because of other contextual factors (e.g., the chronicity of the abusive 407environment in domestic violence) in which the stressor is embedded. Different types of 408 traumatic experiences would also exert a potentially differential impact on an individual's 409ability to develop and maintain SS as well as their PSS. For instance, victims of child sexual 410and physical abuse tend to have a disrupted ability to develop healthy relationships, form 411 attachments, and build trust with significant others. Given this, it is expected that such a 412history will be more potent in eroding one's PSS than, say, a past experience of armed 413robbery or a natural disaster. 414

The potential of chronic stressors to deplete PSS and thus indirectly impact psychological well-being highlights the importance of investigating the Hx of victims of crime and the effects that Hx can have on their PSS and consequently on their mental health. If PSS indeed $\frac{415}{410}$

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plays an important protective role for victims of crime in coping with their victimization, then 418 it would be expected that victims whose PSS has deteriorated due to a chronic history of 419 victimization would suffer more adverse effects from subsequent victimization. Furthermore, 420 given that the loss spiral is most likely to occur when preloss resources are already weak 421 (Hobfoll & Lilly, 1993) and when individuals who already have a chronic Hx experience 422 subsequent victimization, then negative psychological consequences to victimization are 423 more likely to be exacerbated. 424

Classic examples of such victims are those of domestic violence or child sexual abuse. The 425characteristics of these crimes include their abusive and/or sexual nature, which are believed 426to directly threaten the integrity and dignity of the victim, and often violates the victim's trust 427 and attachment capacity (Calhoun & Atkeson, 1991; Thompson et al., 2000). The context of 428 these crimes is usually the privacy of the home or within extended family relationships/ 429friendships and the duration is often prolonged. Furthermore, it is also unfortunately common 430 for such victims to have little actual SS, having been abandoned by other family or friends 431 who do not believe them, or simply are at a loss as to how they should face or handle the 432situation. All in all, such crimes are essentially detrimental to the victims' SS perceptions 433 (which may or may not be accurate reflections of reality). Therefore, unless the victims have 434compensatory resources with which to cope with both the loss of or damage to their SS and 435the impact of the subsequent victimization, the COR theory suggests that they will experience 436a loss spiral resulting in poor psychological adaptation. Compensatory resources that have 437been found in previous studies include self-efficacy (Benight et al., 1999), optimism 438(Fleishman et al., 2000), other personality or personality-related factors (e.g., attachment, 439 Asendorf & Wilpers, 2000; view of self, Muller & Lemieux, 2000), and adaptive coping 440 mechanisms (Fleishman et al., 2000; Holahan & Moos, 1990). 441

The actual process by which PSS changes over time is less clear. Nonetheless, based on 442 existing models and related research at present, a few propositions can be made. COR theory 443 purports that compensatory resources such as those listed above can play a part in the 444 restoration of PSS, the compensation for its loss, or in absorbing the impact of its decline. For 445 example, individuals who are higher on optimism and/or have secure attachments in primary 446 relationships might face the tendency for their PSS to deplete due to the chronicity of a 447 traumatic history, but their confidence and assurance of continued support from significant 448 others can help to deter that decline. Following the SDD model, Norris and Kaniasty 449(1994,1996) reported that PSS has a mediator role between received SS (RSS) and distress. 450This suggests that changes in RSS has an impact on PSS, e.g., through provider burnout, 451depletion of tangible resources (Lepore et al., 1991). Indeed, it is worth noting again that 452changes in perceptions of available support can occur due to accurate or distorted reflections 453of actual support. Furthermore, according to the PRE model, individuals who perceive low SS 454may also demonstrate little support-seeking behaviors, thus isolating themselves from any 455support that is available, potentially resulting in a further decline in PSS levels. It is also 456possible that specific characteristics of a victimization setting may directly affect the victim's 457PSS, (e.g., in a situation where an abusive partner isolates the victim and denigrates the 458victim's sense of dignity and worth, this may affect the their perception of support or love 459from others). Other factors potentially related to PSS changes include satisfaction with SS, 460

network size, and the discrepancy between PSS and RSS—but these remain to be tested 461 explicitly in future research.

4.5. Future directions and recommendations

In view of all this, directions for future research, as well as recommendations for victims' services, can be derived.

Future research in SS needs to heed the assertion of Sarason et al. (1990) that an 467 understanding of SS in the present will profit from an analysis of the past. Having a better 468 appreciation of how SS research has developed over the decades and of the alternative models 469that have emerged with improved and refined instrumentation and analytic techniques is 470essential for this field of research to progress. Notably, further methodological and statistical 471 refinements in this field of research, such as those recommended above, are required. Clearly, 472 a key research question involves differentiating across and when stressors erode SS and when 473they are buffered by it. 474

These points are of particular pertinence when applied to victims of crime. Given that prior 475 victimization is such a potent predictor of revictimization (Acierno et al., 1999), studying the 476 effects of an isolated victimization experience on victims' SS and well-being will provide an 477 incomplete picture of their functioning. If research on victims of crime is to better inform 478policies and the services provided to victims, then the focus of research needs to involve a 479more realistic, dynamic perspective of these individuals' experiences. Amidst other factors of 480 interest, the victimization and trauma history of the victim, as well as the individual's 481 fluctuating perceptions of available support, need to be considered together. 482

For victims' services, the depletable nature of victims' SS given their experience and the 483adverse consequences of this are of great relevance. If PSS can function as a mediator in the 484 victimization-distress relationship (where victimization is conceptualized dynamically), then 485this mediator can be a target of intervention (Banyard, Williams, & Siegal, 2001). Indeed, "if 486 mediating variables that are amenable to intervention can be identified, we can be much more 487 hopeful" (Roche, Rintz, & Hunter, 1999, p. 185) when it comes to facilitating victims' 488 recovery. Regardless of whether these beliefs are accurate or mistaken reflections of actual 489SS, the declining levels of PSS indirectly make these victims less resilient to the psycho-490 logical consequences of their life experiences (including subsequent victimization), resulting 491 in poorer functioning. Therefore, an informed professional judgement of the accuracy of the 492victim's PSS can be helpful for making treatment decisions. For example, where victims' 493perceptions of available SS are mistaken or distorted, interventions should include compo-494 nents to modify these beliefs and psychotherapists may employ cognitive-behavioural 495therapeutic techniques (e.g., Socratic questioning as part of cognitive challenging, providing 496 corrective information through exposure) to help deter the negative impact of depleted PSS. 497On the other hand, where the victim's perceptions of poor support accurately reflect the actual 498support received or available to them, other interventions such as family therapy or other 499 behavioral interventions (e.g., social skills training) might be warranted to increase support-500 seeking behaviors. The actual provision of support (RSS) could deter PSS deterioration and in 501turn lead to improved mental health (Norris & Kaniasty, 1996). 502

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There is also some recent research that suggests that if SS is perceived as negative by the 503victim (i.e., criticism from friends, family, etc), it is as unhelpful as no SS at all (Bolton, 504Glenn, Orsillo, Roemer, & Litz, 2003) and may even account for a large percentage of the 505difference in prevalence found between males and females who go on to develop PTSD 506(Andrews, Brewin, & Rose, 2003). This is also a promising area of research, which may have 507direct relevance to the current article. 508

In conclusion, although there remains a paucity of knowledge as far as a dynamic 509perspective of SS and victim status is concerned, findings from SS research in general have 510been instructive. The postulations offered in this review have been based on the current 511understanding of SS in general. As such, they are open to verification and further discussion, 512as more theory-driven methodologically sophisticated research is undertaken into the role of 513SS for victims of crime. 514

5. Uncited reference

Benight et al., 2000

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